

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Nicholas C Kariya

Political Party (if applicable)

Democrat

Office Sought

Representative

District (if Senate or House)

HD37

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

1841

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Nicholas C Kariya
SIGNATURE OF PERSON FILING REPORT

319-241-4159
TELEPHONE

1/18/10
DATE SIGNED

I AM FILING A January 18, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

168.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL 168.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

29.05

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

138.95

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 847.13

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/06/09	ID# CK# cash	Unitemized receipts of donations received from New Bohemia Arts Festival event visitors (had a booth at the festival)		\$68.00	<input type="checkbox"/>
10/08/09	ID# CK# cash	Nick Kariya 501 Country Hill Ln NE #2 Cedar Rapids, IA 52402	self	100.00	<input type="checkbox"/>
10/27/09	ID# CK#	No contributors. Failed fundraiser at the Longbranch Hotel in Cedar Rapids. Listed here to reconcile In-Kind contributions listed in Schedule E		0.00	<input checked="" type="checkbox"/>
	ID# CK#	recording the cost of room rental and bar tab for the fundraiser performers. For questions, please contact the candidate at 319-241-4159			<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 168.00

TOTAL (If last page of this schedule)

\$ 168.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/30/09	ID# CK# Bank fee	Guaranty Bank PO Box 1807 Cedar Rapids, IA 52406-1807	Checking account maintenance service charge	\$ 5.00
10/30/09	ID# CK# Bank fee	Same as above	Sales tax for above mentioned (10/30) service charge	0.35
11/30/09	ID# CK# Bank fee	Same as above	Checking account maintenance service charge	5.00
11/30/09	ID# CK# Bank fee	Same as above	Sales tax for above mentioned (10/30) service charge	0.35
12/01/09	ID# CK# Bank fee	Same as above	Check order fee	13.00
12/31/09	ID# CK# Bank fee	Same as above	Checking account maintenance service charge	5.00
12/31/09	ID# CK# Bank fee	Same as above	Sales tax for above mentioned (11/30) service charge	0.35
	ID# CK#			
SUB-TOTAL				\$ 29.05
TOTAL (if last page of this schedule)				\$ 29.05

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya



SCHEDULE
E
(Rev. 06/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
08/28/09	Nick Kariya 501 Country Hill Ln NE #2 Cedar Rapids, IA 52402	self	Printing cost for large map of HD37	\$ 4.23	<input type="checkbox"/>
09/02/09	Same as above	self	Website domain registration fee	10.87	<input type="checkbox"/>
09/02/09	Same as above	self	Website hosting fee (3 months)	14.97	<input type="checkbox"/>
09/02/09	Same as above	self	Tent rental for field event	79.23	<input type="checkbox"/>
09/03/09	Same as above	self	Vinyl banner printing costs	143.11	<input type="checkbox"/>
09/04/09	Same as above	self	Picnic table cover	5.30	<input type="checkbox"/>
09/08/09	Same as above	self	Walls for rented tent (see above)	17.25	<input type="checkbox"/>
09/08/09	Same as above	self	Copy fees for campaign materials	9.66	<input type="checkbox"/>
09/16/09	Same as above	self	Display boards (cardboard)	6.93	<input type="checkbox"/>
09/21/09	Same as above	self	Office pens and index cards	4.45	<input type="checkbox"/>
SUB-TOTAL				\$ 296.00	
TOTAL (if last page of this schedule)				\$	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya



SCHEDULE
E
(Rev. 06/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
09/21/09	Nick Kariya 501 Country Hill Ln NE #2 Cedar Rapids, IA 52402	self	Disc of voter data from Linn County Auditor	\$ 13.00	<input type="checkbox"/>
10/10/09	Same as above	self	Copy paper & food for volunteers	9.68	<input type="checkbox"/>
10/27/09	Same as above	self	Bar tab for fundraiser performers	33.75	<input type="checkbox"/>
10/27/09	Same as above	self	Room rental fee for fundraiser	200.00	<input type="checkbox"/>
	Note for above two fields: these were costs associated w/ fundraiser, and d/n constitute committee income				<input type="checkbox"/>
11/4/09	Same as above	self	Mailing envelopes	1.92	<input type="checkbox"/>
11/6/09	Same as above	self	Office paper and printing ink	39.37	<input type="checkbox"/>
11/23/09	Same as above	self	Black and white laser printer	53.49	<input type="checkbox"/>
11/23/09	Same as above	self	Paper cutting board	36.90	<input type="checkbox"/>
11/29/09	Same as above	self	Cardstock and mailing labels	16.24	<input type="checkbox"/>

SUB-TOTAL \$ 404.35

TOTAL (if last
page of this
schedule)

\$

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Page 2 of 3
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Nick Kariya



SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
12/2/09	Nick Kariya 501 Country Hill Ln NE #2 Cedar Rapids, IA 52402	self	Website hosting fee (1 month)	\$ 4.99	<input type="checkbox"/>
12/11/09	Same as above	self	Custom envelopes printing	94.16	<input type="checkbox"/>
12/20/09	Same as above	self	Stamps	36.90	<input type="checkbox"/>
12/20/09	Same as above	self	X-mas cards and mailing labels	8.03	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 146.78	
TOTAL (if last page of this schedule)				\$ 847.13	

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